09/01/2006 13:17

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		roi Otiii	ei illali Ali	Authorize	a Committe	ee		Office Us	e Only	
1.			MAILING LAI OR PRINT		ample:If typing er the lines	, type				
	Baxter Healthcare Political Ac	etion Comm	nittee 				<u> </u>			
Ш										
AD	DRESS (number and street)	1501 K	Street, NW							
>	Check if different									
Ľ	than previously reported. (ACC)	Washir	ngton				DC	20	0005	
2.	FEC IDENTIFICATION NUM	BER 1	_	CITY 🛕			STATE	:	ZIPCODE .	k
	C00117838			3. IS THIS REPORT		NEW N) OR	X	AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	`´R	onthly eport ue On:	Feb 20 (M2		May 20 (M5)		Aug 20 (M8)		20 (M11) n-Election Only)
	(a) Quarterly Reports: April 15 Quarterly Report(Q1)		X	Mar 20 (M3) [,	Jun 20 (M6)		Sep 20 (M9)	(Nor Year	20 (M12) n-Election Only)
				Apr 20 (M4		Jul 20 (M7)		Oct 20 (M10)		31 (YE)
		1) (c)	12-Day		Primary (12P)	Gene	ral (12G)	Bun	off (12R)
	July 15 Quarterly Report(Q	' '	PRE-Election		H		=	,		0 ()
	October 15 Quarterly Report(Q3)	3)	Report for t	Report for the: Convention (12C)	Speci	al (12G)		
	January 31 Quarterly Report(YE	≣)		Election on					in the State of	
	July 31 Mid-Year Report(Non-election Year Only) (MY)		30-Day Post -Elect Report for t	Election General (30G)		a)	Runo	ff (30R)	Spe	cial (30S)
	Termination Report (TER)			Election on					in the State of	
5.	Covering Period 0.2	0	1 200	6	through	02	28	2006		
l ce	ertify that I have examined this F	Report and	to the best of r	ny knowledge	and belief it is	true, correct	and comple	ete.		
Тур	oe or Print Name of Treasurer	Sarah	Creviston							
Sig	nature of Treasurer Electron	nically Filed	l by Sarah C	reviston		D	ate (9 01	200	6
NO	OTE : Submission of false, error	neous, or in	complete infor	mation may s	ubject the perso	on signing thi	s Report to	the penalties	of 2 U.S.C 4	37g.
	Office Use							FEC	FORM 3	X

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name Baxter Healthcare Political Action Committee [®] D " D 0 2 0.2 28 0 1 2006 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 43452.73 [°]2006 January 1 (b) Cash on Hand at 51361.39 Begining of Reporting Period 5677.22 13585.88 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 57038.61 57038.61 6(a) and 6(c) for Column B) 7000.00 7000.00 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 50038.61 50038.61 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission

999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

Baxter Healthcare Political Action Committee

Report Covering the Period:

M M 0 2

From:

01

2006

To:

м м 0 2 D 2 B

2006

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	5677.22	13585.88
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	5677.22	13585.88
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	5677.22	13585.88
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
0.	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5677.22	13585.88
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	5677.22	13585.88

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures..... (c) Total Operating Expenditures 0.00 0.00 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 7000.00 7000.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 7000.00 7000.00 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii)

7000.00

7000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	5677.22	13585.88
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5677.22	13585.88
66. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 6/30
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		7,	
$ \rangle$	Baxter Healthcare Political Action Com	mittee		
	Daxtor Frontinouro Fontiour Fontion Com			
_	Full Name (Last, First, Middle Initial)			
A.	Jennifer Adams			Date of Receipt
	Mailing Address 203 Bridle Path Lane			02 10 2006
	City	State	Zip Code	Transaction ID: 60320.C29031
	Fox River Grove	IL	60021	Amount of Each Receipt this Period
			00021	Amount of Each Necept this Period
	FEC ID number of contributing federal political committee.	C		20.00
				Receipt
	Name of Employer Baxter Healthcare Corpora-	Occupation		ricocipi
	tion	VP I, Sal		_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	' '	40.00	Payroll Deduction: (10.00- Pay Period)
	Carlor (opeony) 🔻		1 1 1 1 1 1 1	, 2, 1 552
	Full Name (Last, First, Middle Initial)			
В.	Joy A Amundson			Date of Receipt
	Mailing Address 110 W. Onwentsia Roa	.d		M M / D D / Y Y Y Y
	Oit. Chata 7in Oada			02 10 2006
	City State		Zip Code	Transaction ID: 60320.C29037
	Lake Forest	IL	60045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		380.30
	Tederal political committee.			Pagaint
	Name of Employer Baxter Healthcare Corpora-	Occupation		Receipt
	tion		es BioScience	
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General		760.60	Payroll Deduction: (190.1- 5/Pay Period)
	Other (specify)		1 1 1 1 1 1 1 1	3/1 ay 1 enou
	Full Name (Last, First, Middle Initial)			
C.	Michael Barlev			Date of Receipt
	Mailing Address 61 Telegraph Hill Rd.			M M / D D / Y Y Y Y
	0"		7' 0 1	02 10 2006
	City	State	Zip Code	Transaction ID: 60320.C29030
	Holmdel	NJ	07733	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2.00
	rederal political committee.			Passint
	Name of Employer Baxter Healthcare Corpora-	Occupation		Receipt
	tion	Sales Re	•	
Primary General			e Year-to-Date ▼	
			4.00	Payroll Deduction: (1.00/- Pay Period)
	Other (specify)		1 1 1 1 1 1 1	Tay renou)
6	UBTOTAL of Receipts This Page (optional)			402.30
\vdash				
T	OTAL This Period (last page this line number of	only)	>	. [

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/30	
	EMIZED RECEIPTS		or each category of the	(check only one)	
••		Detailed Summary Page		X 11a 11b 11c 12 15 16 17	
An	y information copied from such Reports and St	atements may	not be sold or used by any pers		
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full)				
	Baxter Healthcare Political Action Com	mittee			
A.	Full Name (Last, First, Middle Initial) Michael J Baughman			Date of Receipt	
	Mailing Address 5343 N Lakewood Aver	nue		02 10 7 2006	
	City	State	Zip Code	Transaction ID: 60320.C29055	
	Chicago	<u>IL</u>	60640	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		200.00	
	Name of Employer Baxter International Inc.	Occupation CVP, Cor		Receipt	
	Receipt For:		Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	200.00	Payroll Deduction: (100.0- 0/Pay Period)	
— В.	Full Name (Last, First, Middle Initial) Armando Bombino			Date of Receipt	
	Mailing Address 1795 Ashford Lane			0 2 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State		Zip Code	Transaction ID: 60320.C29029	
	Crystal Lake	<u>IL</u>	60014	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		10.00	
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Oper		Receipt	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		20.00	Payroll Deduction: (5.00/- Pay Period)	
<u> </u>	Full Name (Last, First, Middle Initial) Pat Brower			Date of Receipt	
	Mailing Address 502 Canal			0 2 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	City State		Transaction ID: 60320.C29016	
	Cleveland	MS	38732	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		2.00	
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr I, Dis		Receipt	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	4.00	Payroll Deduction: (1.00/- Pay Period)	
s	UBTOTAL of Receipts This Page (optional)			212.00	
	OTAL This Period (last page this line number of				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 30 (check only one) X
An or	ly information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commi	ittee		
۹.	Full Name (Last, First, Middle Initial) Michael Brown Mailing Address 531 Lyon Dr			Date of Receipt
	City	State	Zip Code	0 2 1 0 2 0 0 6 Transaction ID: 60320.C29052
	Buffalo Grove	IL	60089	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2.00
	Rayter International Inc	Occupation Dir, Finan		Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4.00	Payroll Deduction: (1.00/- Pay Period)
3.	Full Name (Last, First, Middle Initial) Glenn Burney			Date of Receipt
	Mailing Address 96 Rock Creek Drive	02 10 7 2006		
	City Mountain Home	State AR	Zip Code	Transaction ID: 60320.C29014
	Mountain Home FEC ID number of contributing federal political committee.	C	72653	Amount of Each Receipt this Period 4.00
	Paytor Hoalthoara Corpora	Occupation Dir, Qual		Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 8.00	Payroll Deduction: (2.00/- Pay Period)
- C.	Full Name (Last, First, Middle Initial) Donna Campagna			Date of Receipt
	Mailing Address 30922 St Andrews Drive			02 / 24 / 2006
	City	State II	Zip Code	Transaction ID: 60320.C29095
	Libertyville FEC ID number of contributing federal political committee.	C	60048	Amount of Each Receipt this Period 20.00
	Name of Employer Baxter Healthcare Corporation VP, Baxter IT		er IT	Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 20.00	Payroll Deduction: (20.00- /Pay Period)
s	UBTOTAL of Receipts This Page (optional)			26.00
Т	OTAL This Period (last page this line number only	v)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 9/30	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
•••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17	
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any pers		
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full)				
	Baxter Healthcare Political Action Com	mittee			
A.	Full Name (Last, First, Middle Initial) John Cone			Date of Receipt	
	Mailing Address 153 Pleasant Valley Dri	ve		02 / 10 / 2006	
	City	State	Zip Code	Transaction ID: 60320.C29023	
	Marion	NC	28752	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		4.00	
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Princip	n pal Engineer	Receipt	
	Receipt For:	<u> </u>	Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	8.00	Payroll Deduction: (2.00/- Pay Period)	
— В.	Full Name (Last, First, Middle Initial) Edward Conrad			Date of Receipt	
	Mailing Address 113 S Waverly PI			0 2 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 60320.C29053	
	Mt Prospect	<u>IL</u>	60056	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		115.42	
	Name of Employer Baxter International Inc.	Occupation Dir, Tax	1	Receipt	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	230.84	Payroll Deduction: (57.71- /Pay Period)	
<u> </u>	Full Name (Last, First, Middle Initial) Sarah Creviston			Date of Receipt	
	Mailing Address 717 North Maple Ave.			0 2 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 60320.C29049	
	<u>Palatine</u>	<u> </u>	60067	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation		C		144.16	
		Occupation VP, Gove	n ernment Affairs	Receipt	
	Receipt For:		Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	288.32	Payroll Deduction: (72.08-/Pay Period)	
s	LUBTOTAL of Receipts This Page (optional)			263.58	
 -	OTAL This Period (last page this line number o	nly)			

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 30
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	ly information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Comm	ittee		
Α.	Full Name (Last, First, Middle Initial) Margarita Cruz-casse			Date of Receipt
	Mailing Address Violeta 153, San Francisco	00		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60320.C29063
	San Juan	PR	00927	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		74.74
	Name of Employer Baxter Healthcare Puerto Rico	Occupation Dir, Logis		Receipt
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		149.48	Payroll Deduction: (37.37- /Pay Period)
В.	Full Name (Last, First, Middle Initial) Robert M Davis			Date of Receipt
	Mailing Address 21515 Hummingbird Cou	02 24 2006		
			Zip Code	Transaction ID: 60320.C29118
	Kildeer	IL	60047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		82.21
	Name of Employer Baxter International Inc.	Occupation CVP, Chi	n lef Financial Officer	Receipt
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	82.21	Payroll Deduction: (82.21- /Pay Period)
<u> </u>	Full Name (Last, First, Middle Initial) Carlos Del Salto			Date of Receipt
	Mailing Address 101 NE 3rd Avenue, Ste. c/o Baxter World Trade	1600		02 10 2006
	City	State	Zip Code	Transaction ID: 60320.C29061
	Ft. Lauderdale	FL	33301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			376.92
	Name of Employer Baxter Export Corporation	Occupation CVP, Pre	n es Intcntl/Asia	Receipt
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		753.84	Payroll Deduction: (188.4- 6/Pay Period)
s	UBTOTAL of Receipts This Page (optional)			533.87
Н	OTAL This Period (last page this line number only			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 11/30	
	EMIZED RECEIPTS		or each category of the	(check only one)	
••	LIMIZED NEGETI 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17	
Δ,	ny information copied from such Reports and St	atomonte may	reat he sold or used by any perso	<u> </u>	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	osolicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full)				
	Baxter Healthcare Political Action Com	mittee			
A.	Full Name (Last, First, Middle Initial) Karen Dewey			Date of Receipt	
	Mailing Address 92 Spring Valley Drive			02 10 7 2006	
	City	State	Zip Code	Transaction ID: 60320.C29008	
	Mtn Home	AR	72653	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		4.00	
	Name of Employer Baxter Healthcare Corpora-	Occupation Planner I		Receipt	
	tion Receipt For:		Year-to-Date ▼		
	Primary General	199.794.1		Payroll Deduction: (2 00/-	
	Other (specify) ▼	0 0	8.00	Payroll Deduction: (2.00/- Pay Period)	
В.	Full Name (Last, First, Middle Initial) Frederick Dodge			Date of Receipt	
	Mailing Address 233 Mtn St			0 2 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 60320.C29017	
	Marion	NC	28752	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		2.00	
	Name of Employer Baxter Healthcare Corpora-	Occupation		Receipt	
	tion		pal Engineer		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)		4.00	Payroll Deduction: (1.00/- Pay Period)	
<u> </u>	Full Name (Last, First, Middle Initial) Mary Fernald			Date of Receipt	
	Mailing Address 36 Wagner Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 60320.C29034	
	Hillsborough	NJ	08844	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		10.00	
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr, Reg		Receipt	
	Receipt For:		e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	20.00	Payroll Deduction: (5.00/- Pay Period)	
	UBTOTAL of Receipts This Page (optional)			16.00	
1 T	OTAL This Period (last page this line number of	niv)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12/30	
	EMIZED RECEIPTS		or each category of the	(check only one)	
•••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17	
Ar	y information copied from such Reports and St	atements may	not be sold or used by any pers		
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full)				
	Baxter Healthcare Political Action Com	mittee			
A.	Full Name (Last, First, Middle Initial) Rodney Foster			Date of Receipt	
	Mailing Address P.O. Box 5074			02 10 7 2006	
	City	State	Zip Code	Transaction ID: 60320.C29010	
	Norman	OK	73070	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		8.00	
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Dir. Er	n ngineering	Receipt	
	Receipt For:		e Year-to-Date ▼		
	Primary General Other (specify) ▼		16.00	Payroll Deduction: (4.00/- Pay Period)	
_	F. II N. L. C. (I and First Affalls 1-19-1)				
В.	Full Name (Last, First, Middle Initial) Kevin Freeman			Date of Receipt	
	Mailing Address 832 Foxmoor Lane			02 10 2006	
	City State		Zip Code	Transaction ID: 60320.C29033	
	Lake Zurich	IL	60047	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		103.84	
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP I, Fina		Receipt	
	Receipt For:		e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	103.84	Payroll Deduction: (51.92- /Pay Period)	
<u> </u>	Full Name (Last, First, Middle Initial) Elizabeth Fuller			Date of Receipt	
٠.	Mailing Address 975 Seaboard Ave			0 2 1 0 2 0 0 6	
	City	State	Zip Code	Transaction ID: 60320.C29043	
	Atlanta	GA	30318	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		14.10	
	federal political committee.			Pagaint	
Name of Employer Baxter Healthcare Corpora- tion Receipt For:		Occupation Mgr, Stat	n te Government Affairs	Receipt	
		Aggregate	e Year-to-Date ▼		
Primary General Other (specify) ▼			28.20	Payroll Deduction: (7.05/- Pay Period)	
<u> </u>	UBTOTAL of Receipts This Page (optional)			125.94	
\vdash	ODITAL OF HOOGIPIS THIS Fage (optional)				
ΙT	OTAL This Period (last page this line number of	only)			

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 13/30
ITEMIZED RECEIPTS		or each category of the	(check only one)
••		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and Statements m	av not be sold or used by any perso	
or	for commercial purposes, other than using the name and a	ddress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)		
$ \rangle$	Baxter Healthcare Political Action Committee		
\angle	E 11.11 (1 . E A.C.) 11 . C. (1		1
Α.	Full Name (Last, First, Middle Initial) James Gatling		Date of Receipt
	Mailing Address 3704 Lindsay Ln		M M / D D / Y Y Y Y
			02 10 2006
	City State	Zip Code	Transaction ID: 60320.C29015
	Crystal Lake IL	60014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee		240.00
	federal political committee.		
	Name of Employer Baxter Healthcare Corpora-	on	Receipt
	tion CVP, G	lobal Manufacturing Ops	
		te Year-to-Date ▼	
	Primary General Other (specify) ▼	480.00	Payroll Deduction: (120.0- 0/Pay Period)
	Other (specify)	0 0 0 0 0 0 0	on ay renod
_	Full Name (Last, First, Middle Initial)		+
В.	,		Date of Receipt
	Mailing Address 17842 Rachel Lane		M M / D D / Y Y Y Y
	City State	Zip Code	02 10 2006
	Orland Park IL	60467	Transaction ID: 60320.C29025
	EEO ID work or Constitution	00407	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		10.00
			Receipt
	Name of Employer Occupati Baxter Healthcare Corpora-		
	1011	Mgr I, IT te Year-to-Date ▼	-
	Primary General	ite real to bate 🔻	Payroll Deduction: (5.00/-
	Other (specify) ▼	20.00	Pay Period)
_	Full Name (Last, First, Middle Initial)		Data of Bassist
C.	John Greisch Mailing Address 2636 Chesapeake Lane		Date of Receipt
	Mailing Address 2636 Chesapeake Lane		02 10 2006
	City State	Zip Code	Transaction ID: 60320.C29059
	Northbrook IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing		400.00
	federal political committee.		400.00
		on	Receipt
		resident - International	
		te Year-to-Date ▼	
	Primary General	800.00	Payroll Deduction: (200.0- 0/Pay Period
	Other (specify) ▼	000.00	o/Pay Period)
	i i		
٦	UBTOTAL of Receipts This Page (optional)		650.00
s	UBTOTAL of Receipts This Page (optional)		650.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 14/30
	EMIZED RECEIPTS		or each category of the	(check only one)	
•••	LIMIZED RECEIL 13		Detailed Summary Page	X 11a 11b	11c 12
Δ.	we information conicd from such Deports and Ci	tatamanta ma	reat he cold or used by only never	13 14	15 16 17
or	ny information copied from such Reports and Si for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from s	uch committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	Baxter Healthcare Political Action Com	mittee			
	Full Name (Last, First, Middle Initial)			5	
Α.	Lawrence Guiheen			Date of Receipt	
	Mailing Address 1653 Vista Oaks Way			0 2 1 0	2006
	City	State	Zip Code	Transaction ID: 603	
	Westlake Vilage	CA	91361	Amount of Each Red	
	FEC ID number of contributing		0.00.	7 Amount of Edon floo	· · · · · · · · · · · · · · · · · · ·
	federal political committee.	C			70.00
				Receipt	
	Name of Employer Baxter Healthcare Corpora-	Occupation		1.000.pt	
	tion Receipt For:	Presiden			
	Primary General	Aygregate	e Year-to-Date ▼	1 D. H.D. L. C.	(05.00
	Other (specify)		140.00	Payroll Deduction: /Pay Period)	(35.00-
				' '	
	Full Name (Last, First, Middle Initial)				
В.	r			Date of Receipt	
	Mailing Address 601 Baxter Avenue			0 2 1 0	2006
	City State Mtn Home AR		Zip Code		
			72653	Transaction ID: 603	
		An	72000	Amount of Each Rec	elpt this Period
	FEC ID number of contributing federal political committee.	C			4.00
				Receipt	
	Name of Employer Baxter Healthcare Corpora-	Occupation		riccopt	
	tion	Sr Plann	- -		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		(0.00)
	Other (specify)		8.00	Payroll Deduction: (2.00/- Pay Period)	
	care. (openly) 🔻	0 0	1 1 1 1 1 1 1		
_	Full Name (Last, First, Middle Initial)	I			
C.	James Kamienski			Date of Receipt	
	Mailing Address 6312 N Keating			0 2 1 0	2006
	City	State	Zip Code	Transaction ID: 603	
	Chicago	IL	60646	Amount of Each Red	
	•		00040	Afficult of Each Nec	eipi iriis Feriod
	FEC ID number of contributing federal political committee.	C			97.52
				Receipt	
	Name of Employer Baxter Healthcare Corpora-	Occupation		riccopt	
	tion		nufacturing		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		(40.70
Other (specify)			195.04	Payroll Deduction: /Pay Period	(48.76-
		0 0	1 1 1 1 1 1 1	, ,	
Г					
s	UBTOTAL of Receipts This Page (optional)				171.52
\vdash	. 5 (, , ,			-	
T	OTAL This Period (last page this line number	only)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/30			
	EMIZED RECEIPTS		or each category of the	(check only one)			
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17			
Δn	y information copied from such Reports and Sta	tements may	y not be sold or used by any ners				
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	o solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
	Baxter Healthcare Political Action Comm	nittee					
A.	Full Name (Last, First, Middle Initial) Faye Katt			Date of Receipt			
	Mailing Address 1906 N Larrabee			02 / 10 / 2006			
	City	State	Zip Code	Transaction ID: 60320.C29039			
	Chicago	IL	60614	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		20.00			
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP Globa	n al HR Shared Services	Receipt			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		40.00	Payroll Deduction: (10.00-/Pay Period)			
В.	Full Name (Last, First, Middle Initial) Carol Lampe			Date of Receipt			
	Mailing Address 303 Northwind Dr.			02 10 2006			
	City State		Zip Code	Transaction ID: 60320.C29026			
	<u>Lake Villa</u>	IL	60046	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		2.00			
	Name of Employer Baxter Healthcare Corpora-	Occupation Sr Research Scientist		Receipt			
	tion Receipt For:		Year-to-Date V	-			
	Primary General			Payroll Deduction: (1.00/-			
	Other (specify) ▼		4.00	Pay Period)			
c.	Full Name (Last, First, Middle Initial) Susan R Lichtenstein			Date of Receipt			
	Mailing Address 1257 W Wrightwood Ave	е		02 10 2006			
	City	State	Zip Code	Transaction ID: 60320.C29056			
	Chicago	IL	60614	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		365.38			
	Name of Employer Baxter International Inc.	Occupation CVP, Ger	n neral Counsel	Receipt			
Receipt For:		Aggregate	Year-to-Date ▼				
Primary General Other (specify) ▼			730.76	Payroll Deduction: (182.6- 9/Pay Period)			
s	UBTOTAL of Receipts This Page (optional)			387.38			
T,	OTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16/30			
	ITEMIZED RECEIPTS		or each category of the	(check only one)			
			Detailed Summary Page	X 11a 11b 11c 12 15 16 17			
Ar	y information copied from such Reports and St	atements may	not be sold or used by any pers				
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
	Baxter Healthcare Political Action Com	mittee					
A.	Full Name (Last, First, Middle Initial) Gary Loudermilk			Date of Receipt			
	Mailing Address 570 S Creek Rd			02 / 10 / 2006			
	City	State	Zip Code	Transaction ID: 60320.C29022			
	Nebo	NC	28761	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		4.00			
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Supt, Ma	nufacturing	Receipt			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	8.00	Payroll Deduction: (2.00/- Pay Period)			
— В.	Full Name (Last, First, Middle Initial) Matthew Lykken			Date of Receipt			
	Mailing Address 421 North Wheaton Ave	0 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City	State Zip Code					
	Wheaton	<u> </u>	60187	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		49.47			
	Name of Employer Baxter International Inc.	Occupation VP, Tax Aggregate Year-to-Date ▼		Receipt			
	Receipt For:						
	Primary General Other (specify) ▼		49.47	Payroll Deduction: (49.47- /Pay Period)			
<u> </u>	Full Name (Last, First, Middle Initial) Brian W Magerkurth			Date of Receipt			
	Mailing Address 4218 Third Street Lane	0 2 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: 60320.C29038			
	Hickory	NC	28601	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		105.76			
	Name of Employer Baxter Healthcare Corpora- tion		obal Supply Chain	Receipt			
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	105.76	Payroll Deduction: (52.88- /Pay Period)			
s	UBTOTAL of Receipts This Page (optional)			159.23			
Т	OTAL This Period (last page this line number only)						

SCHEDULE A (FEC Form 3X)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/30	
	EMIZED RECEIPTS		or each category of the	(check only one)	
TI EIMIZED TIEGEII TO			Detailed Summary Page	X 11a 11b 11c 12	
Δ	information conicd from such Deposits and O	-1		13 14 15 16 17	
or	y information copied from such Reports and St for commercial purposes, other than using the	name and add	dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full)				
	Baxter Healthcare Political Action Com	mittee			
A.	Full Name (Last, First, Middle Initial) Teresita Martinez-santini			Date of Receipt	
	Mailing Address A-1 Atenas St Repto Fl	amingo		02 10 2006	
	City	State	Zip Code	Transaction ID: 60320.C29062	
	Bayamon	PR	00959	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		66.14	
	Name of Employer Baxter Healthcare Puerto	Occupation Dir, Qual		Receipt	
	Rico Receipt For:		Year-to-Date ▼		
	Primary General	33 -3		Payroll Deduction: (33.07-	
	Other (specify) ▼	0 0	132.28	/Pay Period)	
В.	Full Name (Last, First, Middle Initial) John Martino			Date of Receipt	
	Mailing Address 104 Dumont Dr			0 2 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 60320.C29011	
	Morganton	NC	28655	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		2.00	
	Name of Employer Baxter Healthcare Corpora-	Occupation Dir, Qual		Receipt	
	tion Receipt For:		Year-to-Date ▼		
	Primary General			Payroll Deduction: (1.00/-	
	Other (specify) ▼	0 0	4.00	Pay Period)	
<u>С</u> .	Full Name (Last, First, Middle Initial) Kevin Mcculloch			Date of Receipt	
	Mailing Address 730 Greenwood Avenu	e		02 10 2006	
	City	State	Zip Code	Transaction ID: 60320.C29045	
	Wilmette	<u> </u>	60091	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		100.00	
	Name of Employer Baxter Healthcare Corpora-	Occupation	n	Receipt	
	Baxter Healthcáre Corpora- tion		Manager III		
Receipt For:		Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	200.00	Payroll Deduction: (50.00- /Pay Period)	
S	UBTOTAL of Receipts This Page (optional)			168.14	
\vdash	obiolia)				
T	OTAL This Period (last page this line number of	only)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 30 (check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Comm	nittee		
Α.	Full Name (Last, First, Middle Initial) Bruce Mcgillivray			Date of Receipt
Mailing Address 151 Ridge Lane				M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: 60320.C29041
	<u>Lake Forest</u>	IL	60045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		260.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation	n esident Renal	Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	Payroll Deduction: (130.0- 0/Pay Period)
— В.	Full Name (Last, First, Middle Initial) Donald Mcpeters			Date of Receipt
	Mailing Address 119 North Hills Drive			02 10 2006
	City	State	Zip Code	Transaction ID: 60320.C29021
	Marion	NC	28752	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Supv II, I	n Manufacturing	Receipt
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		4.00	Payroll Deduction: (1.00/- Pay Period)
<u>с.</u>	Full Name (Last, First, Middle Initial) Victor Miller			Date of Receipt
	Mailing Address 230 9th Street			02 10 2006
	City	State	Zip Code	Transaction ID: 60320.C29044
	Wilmette	IL	60091	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			7.70
Name of Employer Baxter Healthcare Corpora- tion		Occupation Dir, Mark		Receipt
	Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼			15.40	Payroll Deduction: (3.85/- Pay Period)
s	UBTOTAL of Receipts This Page (optional)			269.70
Н	OTAL This Period (last page this line number or			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 19/30
	TEMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED HEOLII 13		Detailed Summary Page	X 11a 11b 11c 12
Λ	we information conicd from such Departs and Ct	atamanta mai	, not be cold or used by one norse	13 14 15 16 17
or	y information copied from such Reports and St for commercial purposes, other than using the	solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	Baxter Healthcare Political Action Com	mittee		
A.	Full Name (Last, First, Middle Initial) Arthur Mollenhauer			Date of Receipt
	Mailing Address 2409 Lincolnwood Drive			02 10 2006
	City	State	Zip Code	Transaction ID: 60320.C29035
	Evanston	IL	60201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Baxter Healthcare Corpora-	Occupation General I	n Manager II	Receipt
	tion Receipt For:		Year-to-Date ▼	-
	Primary General			Payroll Deduction: (25,00-
	Other (specify)	0 0	100.00	Payroll Deduction: (25.00- /Pay Period)
В.	Full Name (Last, First, Middle Initial) Frank Monteleone			Date of Receipt
	Mailing Address 4620 Forest Edge Lane	02 10 2006		
	City State Zip		Zip Code	Transaction ID: 60320.C29047
	Long Grove	IL	60047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		126.50
	Name of Employer Baxter Healthcare Corpora-	Occupation VP, Baxto		Receipt
	tion Receipt For:	,	e Year-to-Date ▼	_
	Primary General	33 -3		Payroll Deduction: (63.25-
	Other (specify)		253.00	/Pay Period)
C.	Full Name (Last, First, Middle Initial) Barbara Morris			Date of Receipt
	Mailing Address 924 N. Saratoga Dr.			02 10 7 2006
	City	State	Zip Code	Transaction ID: 60320.C29024
	Palatine	<u>IL</u>	60074	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP II, HF		Receipt
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	40.00	Payroll Deduction: (10.00-/Pay Period)
s	UBTOTAL of Receipts This Page (optional)			196.50
\vdash				
T	OTAL This Period (last page this line number of	only)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20/30			
	ITEMIZED RECEIPTS		or each category of the	(check only one)			
			Detailed Summary Page	X 11a 11b 11c 12 15 16 17			
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any person				
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
	Baxter Healthcare Political Action Com	mittee					
A.	Full Name (Last, First, Middle Initial) Timothy Murphy			Date of Receipt			
	Mailing Address 14601 N Somerset Circ	le		02 / 10 / 2006			
	City	State	Zip Code	Transaction ID: 60320.C29046			
	Libertyville	<u> </u>	60048	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		40.70			
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Asst Gen	eral Counsel	Receipt			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General		81.40	Payroll Deduction: (20.35-			
	Other (specify)	01.40		/Páy Period)՝			
В.	Full Name (Last, First, Middle Initial) Peter Omalley			Date of Receipt			
	Mailing Address 563 Greenway Drive	02 10 2006					
	City	State	Zip Code	Transaction ID: 60320.C29050			
	<u>Lake Forest</u>	<u> L</u>	60045	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		90.00			
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP/GM II		Receipt			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼	180.00		Payroll Deduction: (45.00-/Pay Period)			
<u> </u>	Full Name (Last, First, Middle Initial) Robert L Parkinson			Date of Receipt			
	Mailing Address 1332 Edgewood Lane			02 10 2006			
	City	State	Zip Code	Transaction ID: 60320.C29058			
	Northbrook	IL	60062	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		876.92			
	Name of Employer Baxter International Inc.	Occupation Chairman		Receipt			
	Receipt For:	Aggregate	Year-to-Date ▼				
Primary General Other (specify) ▼			1753.84	Payroll Deduction: (438.4- 6/Pay Period)			
s	UBTOTAL of Receipts This Page (optional)			1007.62			
H	OTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 30
	EMIZED RECEIPTS		or each category of the	(check only one)
THE MILE OF THE		Detailed Summary Page	X 11a 11b 11c 12 15 16 17	
۸r	ny information copied from such Reports and Si	tatamente mai	rot be sold or used by any perso	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	Baxter Healthcare Political Action Com	mittee		
\angle				
Α.	Full Name (Last, First, Middle Initial) Carla Pittman			Date of Receipt
۸.	Mailing Address 5720 Shenandoah Ave	nue		M M / D D / Y Y Y Y
				02 10 2006
	City	State	Zip Code	Transaction ID: 60320.C29042
	Los Angeles	CA	90056	Amount of Each Receipt this Period
	FEC ID number of contributing	C		100.10
	federal political committee.			
	Name of Employer	Occupation	n	Receipt
	Baxter Healthcare Corpora- tion	Sr Couns	sel	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	200.20	Payroll Deduction: (50.05- /Pay Period)
	Other (speedily)	1 1		/ ay i chica
	Full Name (Last, First, Middle Initial)			
В.	Virginia Pringle			Date of Receipt
	Mailing Address 341 3rd Street West			02 10 2006
	City	State	Zip Code	
	Tierra Verde	FL	33715	Transaction ID: 60320.C29028 Amount of Each Receipt this Period
	FEC ID number of contributing		00710	
	federal political committee.	C		54.98
	Name of European	10		Receipt
	Name of Employer Baxter Healthcare Corpora-	Occupation Mar II O	n perations	·
	tion Receipt For:		e Year-to-Date V	-
	Primary General	1 99 19 111		Payroll Deduction: (27.49-
	Other (specify) ▼		109.96	/Pay Period)
_				
C.	Full Name (Last, First, Middle Initial) Neervalur Raghavan			Date of Receipt
٠.	Mailing Address 2327 Castilian			M M / D D / Y Y Y Y
				02 10 2006
	City	State	Zip Code	Transaction ID: 60320.C29027
	Northbrook	<u> L</u>	60062	Amount of Each Receipt this Period
	FEC ID number of contributing	С		10.00
	federal political committee.			Descript
	Name of Employer Baxter Healthcare Corpora-	Occupation		Receipt
	tion	VP I, Res		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		20.00	Payroll Deduction: (5.00/- Pay Period)
Outer (specify)			0 0 0 0 0 0 0	1 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
s	UBTOTAL of Receipts This Page (optional)			165.08
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T	OTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 22/30
	ITEMIZED RECEIPTS		or each category of the	(check only one)	
•••	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b	11c 12
				13 14	15 16 17
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may lame and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of solicitions from :	ting contributions such committee
<u>()</u>	NAME OF COMMITTEE (In Full)		are or any point our committee to		
$ \rangle$	Baxter Healthcare Political Action Comr	nittee			
	Daxiel Fleatificate Folitical Action Com	inttoc			
_	Full Name (Last, First, Middle Initial)				
A.	Elizabeth Redd			Date of Receipt	
	Mailing Address 604 South Leflore			0 2 1 0	2006
	City	State	Zip Code		
	Cleveland	MS	38732	Transaction ID: 60	
		IVIO	30732	Amount of Each Re	ceipi inis Penod
	FEC ID number of contributing federal political committee.	C			2.00
	·			Receipt	
	Name of Employer Baxter Healthcare Corpora-	Occupation		rieceipi	
	tion	Plant Co			
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)	' '	4.00	Payroll Deduction: Pay Period	: (1.00/-
	Cirior (Specify)	1 1	1 1 1 1 1 1 1)	
_	Full Name (Last, First, Middle Initial)				
В.	David Rohrbach			Date of Receipt	
	Mailing Address 10 Hawkes Court			M M / D D	
	City State			02 10	2006
			Zip Code	Transaction ID: 60	
	Bridgewater	NJ	08807	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			20.00
	rederal political committee.			Descipt	
	Name of Employer Baxter Healthcare Corpora-	Occupation		Receipt	
	tion tion	VP I, Qua	-		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		20.00	Payroll Deduction: (10.00- /Pay Period)	
	Other (specify)			/Fay Fellou)
	Full Name (Last, First, Middle Initial)				
C.	Harold Sargent			Date of Receipt	
	Mailing Address 1151 Woodview Drive			M M / D D	
	0"		7: 0 :	02 10	2006
	City	State	Zip Code	Transaction ID: 60	
	Green Oaks	<u>IL</u>	60048	Amount of Each Re	ceipt this Period
	FEC ID number of contributing	C			4.00
	federal political committee.				
	Name of Employer Baxter Healthcare Corpora-	Occupation	n	Receipt	
	tion	Sr Dir, R			
		Aggregate	e Year-to-Date ▼		
	Primary General	, ,	8.00	Payroll Deduction: Pay Period	: (2.00/-
	Other (specify)			ray reliou)	
۹	UBTOTAL of Receipts This Page (optional)				26.00
\vdash	ODITION OF TROCEIPES THIS LAYE (OPHOLIA!)		······································		
T	OTAL This Period (last page this line number or	nly)	>		

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 30
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a
Ar or	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Committee		
Α.	Full Name (Last, First, Middle Initial) David P Scharf		Date of Receipt
	Mailing Address 931 Oak Street		0 2 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Transaction ID: 60320.C29120
	Winnetka IL FEC ID number of contributing federal political committee.	60093	Amount of Each Receipt this Period 40.38
	Name of Employer Baxter International Inc. Occupat CVP, C	ion orporate Secretary	Receipt
	Receipt For: Primary General Other (specify) ▼ Aggrega	ate Year-to-Date ▼ 40.38	Payroll Deduction: (40.38-/Pay Period)
Full Name (Last, First, Middle Initial) B. Michael Schiffer			Date of Receipt
	Mailing Address 33741 Shackleton Isle	02 10 2006	
	City State	Zip Code	Transaction ID: 60320.C29036
	Monarch Beach CA	92629	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		134.78
	1011	General Counsel	Receipt
	Receipt For: Primary General Other (specify) ▼	ate Year-to-Date ▼ 269.56	Payroll Deduction: (67.39-/Pay Period)
<u> </u>	Full Name (Last, First, Middle Initial) Victor Schmitt		Date of Receipt
	Mailing Address 699 Bluff Road		02 10 2006
	City State Lake Bluff IL	Zip Code	Transaction ID: 60320.C29032
	FFC ID as such as of a satisfaction.	60044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		77.00 Receipt
	tion	enture Management	Песері
	Receipt For: Primary General Other (specify) ▼	ate Year-to-Date ▼ 154.00	Payroll Deduction: (38.50-/Pay Period)
s	UBTOTAL of Receipts This Page (optional)		252.16
Н	OTAL This Period (last nage this line number only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 30 (check only one) X
An or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Comm	ittee		
۹.	Full Name (Last, First, Middle Initial) Chandra Sekhar Mailing Address 1621 Mission Hills Rd Ur	nit 211		Date of Receipt
	City	State	Zip Code	0 2 1 0 2 0 0 6 Transaction ID: 60320.C29005
	Northbrook	IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer Baxter Healthcare Corpora- tion		n g Strategic Planning e Year-to-Date ▼	Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate	30.00	Payroll Deduction: (10.00-/Pay Period)
3.	Full Name (Last, First, Middle Initial) Chandra Sekhar			Date of Receipt
	Mailing Address 1621 Mission Hills Rd Ur	02 24 2006		
	City	State	Zip Code	Transaction ID: 60320.C29065
	Northbrook FEC ID number of contributing federal political committee.	C	60062	Amount of Each Receipt this Period 49.06
	Name of Employer Baxter Healthcare Corpora- tion		g Strategic Planning	Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 79.06	Payroll Deduction: (49.06-/Pay Period)
).	Full Name (Last, First, Middle Initial) Deborah Spak			Date of Receipt
Mailing Address 1555 Stratford				02 10 7 2006
	City	State	Zip Code	Transaction ID: 60320.C29057
	Deerfield	IL	60015	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		22.40 Receipt
	Name of Employer Baxter International Inc.	Occupation Dir, Com	n munications	Ποσορί
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 44.80	Payroll Deduction: (11.20-/Pay Period)
s	UBTOTAL of Receipts This Page (optional)			81.46
т.	OTAL This Period (last page this line number on	v)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 30 (check only one)			
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Comm	nittee					
۸.	Full Name (Last, First, Middle Initial) Edward Sudow			Date of Receipt			
	Mailing Address 2406 N Hickory	0	7: 0 1	02 10 2006			
	City Arlington Heights	State II	Zip Code 60004	Transaction ID: 60320.C29004 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		4.00			
	Name of Employer Baxter Healthcare Corpora- tion		upply Chain	Receipt			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	Payroll Deduction: (2.00/- Pay Period)			
3.	Full Name (Last, First, Middle Initial) Donald Sullivan			Date of Receipt			
	Mailing Address 910 W Cypress Drive	02 / 10 / 2006					
	City Arlington Heights	State	Zip Code	Transaction ID: 60320.C29051			
	FEC ID number of contributing federal political committee.	C	60005	Amount of Each Receipt this Period 80.00			
	Name of Employer Baxter International Inc.		Management	Receipt			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 160.00	Payroll Deduction: (40.00-/Pay Period)			
).	Full Name (Last, First, Middle Initial) Andrew Thorrens			Date of Receipt			
	Mailing Address 1835 North Hoyne			02 10 / Y Y Y Y Y Y			
	Chicago	State II	Zip Code 60647	Transaction ID: 60320.C29054 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		4.00			
	Name of Employer Baxter International Inc.		nent Planning	Receipt			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 8.00	Payroll Deduction: (2.00/- Pay Period)			
S	UBTOTAL of Receipts This Page (optional)			88.00			
T	TOTAL This Period (last page this line number only)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 26/30
	TEMIZED RECEIPTS		or each category of the	(check only one)	
••	LIMIZED REGEN 13		Detailed Summary Page	X 11a 11b 13 14	11c 12 15 16 17
Δr	ny information copied from such Reports and Staten	nonte mai	rnot he cold or used by any norse		
or	for commercial purposes, other than using the nam	ne and add	dress of any political committee to	solicit contributions from s	uch committee.
\setminus	NAME OF COMMITTEE (In Full)				
$ \rangle$	Baxter Healthcare Political Action Commit	tee			
\angle				_	
Α.	Full Name (Last, First, Middle Initial) Pablo Toledo			Date of Receipt	
Λ.	Mailing Address 257 E Delaware PI			M M / D D	/ Y Y Y Y
	Apt 4C			02 10	2006
	City	State	Zip Code	Transaction ID: 609	901.C29981
	Chicago	IL	60611-5722	Amount of Each Rec	eipt this Period
	FEC ID number of contributing	С			150.00
	federal political committee.	<u> </u>			100.00
	Name of Employer	Occupation	<u> </u>	Receipt	
	Multi-Business Services Corpor	Dir, Finaı	nce		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		150.00		
	Other (specify)	1 1	100.00		
	Full Name (Last, First, Middle Initial)				
В.				Date of Receipt	
	Mailing Address 1365 Vos Court			M M / D D	
	011	7' 0 1	02 10	2006	
	City	State Zip Code		Transaction ID: 603	
	Antioch	<u>IL</u>	60002	Amount of Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C			80.00
				Receipt	
	Poytor Hoolthoore Corpore	Occupation		riccopt	
	tion		Manager II • Year-to-Date ▼		
	Primary General	Aggregate	: feai-lo-Dale V	Payroll Deduction: (40.00-	(40.00
	Other (specify)		160.00	Payroll Deduction: (Pay Period)	(40.00-
				' '	
_	Full Name (Last, First, Middle Initial)				
C.	James Utts			Date of Receipt	
	Mailing Address 441 thorne lane			02 10	2006
	City	State	Zip Code	Transaction ID: 603	320.C29060
	Lake Forest	IL	60045	Amount of Each Rec	
	FEC ID number of contributing	_	1 1 1 1 1		76.02
	federal political committee.	С			76.92
	Name of Employer	Occupation	 1	Receipt	
	Paytor World Trada Corpor		sident Europe		
		Aggregate	Year-to-Date ▼		
	Primary General		153.84	Payroll Deduction:	(38.46-
	Other (specify) ▼	1 1	155.04	/Páy Period)	
۱ و	UBTOTAL of Receipts This Page (optional)				306.92
\vdash	ODIOTAL OF HOCOIPES THIS Fage (optional)				
T	OTAL This Period (last page this line number only)				

S	CHEDULE A (FEC Form 3X)	FOR LINE NUMBER:	PAGE 27/30					
ITEMIZED RECEIPTS Use separate schedule(s or each category of the				(check only one)				
TI EIVIIZED TIEGEII TO			Detailed Summary Page	X 11a 11b	11c 12			
Δ.	information assist from such Departs and Ch	13 14	15 16 17					
or	y information copied from such Reports and Sta for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from s	such committee.			
	NAME OF COMMITTEE (In Full)							
$ \rangle$	Baxter Healthcare Political Action Com	mittee						
\angle								
	Full Name (Last, First, Middle Initial)			Data of Descipt				
Α.	Onelia Vera-littrell Mailing Address 619 Oleander Drive			Date of Receipt				
	Mailing Address 619 Oleander Drive			02 10	2006			
	City	State	State Zip Code Transaction ID: 60320.C29048					
	<u>Hallandale</u>	FL	33009	Amount of Each Receipt this Period				
	FEC ID number of contributing			1 1 1 1 1 1 1				
	federal political committee.	C		145.82				
	Name of Employer	Occupation	า	Receipt				
	Name of Employer Baxter Healthcare Corpora- tion		eral Counsel					
	Receipt For:	-	Year-to-Date ▼					
	Primary General	1 1	291.64	Payroll Deduction: /Pay Period	(72.91-			
	Other (specify) ▼		291.04	Pay Period) `			
В.	Full Name (Last, First, Middle Initial) Kenneth R Webb			Date of Receipt				
	Mailing Address 31385 W. Somerset Cir	cle		M M / D D	/ Y 			
				02 24 2006				
	City	State	Zip Code	Transaction ID: 60320.C29100				
	Green Oaks	<u> </u>	60048	Amount of Each Red	ceipt this Period			
FEC ID number of contributing		C			10.00			
federal political committee.								
	Name of Employer Baxter Healthcare Corpora-	Occupation	า	Receipt				
Baxter Healthcare Corpora- tion		VP, Cust	omer Svc & E-Commerce					
	Receipt For:	Aggregate	e Year-to-Date ▼					
Primary General			10.00	Payroll Deduction: (10.00- /Pay Period)				
	Other (specify)	0 0		I / ay r enou	,			
_	Full Name (Last, First, Middle Initial)							
C.	Clara Williams			Date of Receipt				
	Mailing Address 36 3rd St			0 2 1 0	2006			
	City	State	Zip Code	Transaction ID: 60				
	Cleveland	MS	38732	Amount of Each Red				
			00102	Amount of Lacif Net	Jeipt tills Fellod			
FEC ID number of contributing federal political committee.		C			2.00			
		10		Receipt				
Baxter Healthcáre Corpora- tion		Occupation Quality A						
			Year-to-Date ▼					
		riggregate	Total to Bate V	Payroll Deduction:	(1.00/-			
Other (specify) ▼		1	4.00	4.00 Payroll Deduction: (1.00/- Pay Period)				
					157.00			
S	UBTOTAL of Receipts This Page (optional)		157.82					
T	OTAL This Period (last page this line number o							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 28/30 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Committee Full Name (Last, First, Middle Initial) A. Donna Williams Date of Receipt Mailing Address 1886 Bowling Green 0 2 10 2006 City State Zip Code **Transaction ID:** 60320.C29020 Lake Forest IL 60045 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Receipt Name of Employer Baxter Healthcare Corpora-Occupation VP I, Marketing tion Receipt For: Aggregate Year-to-Date ▼ Primary General Payroll Deduction: (5.00/-Pay Period) 20.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	10.00
TOTAL This Period (last page this line number only)	•	5677.22

SCHEDULE B (FEC Form 3X)

TEMIZED DIODUDOEMENTO		Use seperate schedule(s)		(check o					NGE	29 / 3	0		
ľ	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27		· -	23 28b	24 28c		25 29	\Box	26 30b	
	y Information copied from such Reports and Staten										5		
or	for commercial purposes, other than using the nam	e and address of any politic	al com	mittee to	solicit	contrib	utions fro	om such	comr	nittee			
\	NAME OF COMMITTEE (In Full)												
/	Baxter Healthcare Political Action Commit	tee											
	Full Name (Last, First, Middle Initial)				1	ransac	tion ID:	60320.	E68	2			
٦.	Feinstein 2000					мм	Disburse / D		γ ° γ	Y	Υ		
	Mailing Address PO Box 75156					0 2	1	5 /	2	0 0 6			
	City Washington	State Zip Code DC 20013-015	 8		1	Amount	of Each	Disburse	emen	t this P	erio	d	
	Purpose of Disbursement	20010 0100	, 		-	,			1	000.0	0		
	Tarposo of Bisbarsoment			· ·		-				-			
	Candidate Name			tegory/ Type									
	· —	ement For: 2006	•										
		Primary General											
	President State: District:	Other (specify) ▼											
	Full Name (Last, First, Middle Initial)				٠.	-	ID	00000		4			
3.	Hastert for Congress Committee						Disburse	60320.l ement	E684	4			
	Mailing Address 6344 Cavalier Corridor				02 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City Falls Church	State Zip Code VA 22044-1203	3		/	Amount	of Each	Disburse	emen	t this P	erio	b	
	Purpose of Disbursement			•					2	2500.0	0		
	One Polate Name												
	Candidate Name DENNIS J. HASTERT			itegory/ Type									
	Office Sought: X House Disburs	ement For: 2006	•										
		Primary General											
	President State: IL District: 14	Other (specify)											
	Full Name (Last, First, Middle Initial)				+-			00000	-				
).	Bill Nelson for US Senate						Disburse	60320. ement	⊏ 68.	3			
	Mailian Address DO D 40000				- 1	0 ^M 2 M	/ D	D /	γ Υ Υ	0 ŏ 6	Υ		
	Mailing Address PO Box 10962					0 2	l L.			000			
	City Tallahassee	State Zip Code FL 32302-2962			/	Amount	of Each	Disburse	emen	t this P	erio	b	
	Purpose of Disbursement	FL 32302-296	<u>-</u> T		-	,			1	000.0	0		
								_		-			
	Candidate Name			itegory/ Γγρе									
	Office Sought: House Disburse	ement For: 2006	1	. ,,,,									
		Primary General											
	President	Other (specify)											
	State: District:												
s	UBTOTAL of Disbursements This Page (optional)			▶					4	500.0	0		
				··· /		-	-		-		-	=	
Т	OTAL This Period (last page this line number only)	١											

SCHEDULE B (FEC Form 3X)

	Use seperate schedule(s)	(check onl	NUMBER: v one)	L	PAGE 30/	30
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 24 28b 28	3c 29	26 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the name.						ıs
NAME OF COMMITTEE (In Full)	.s and address of any pointed to				55.1111111106	
Baxter Healthcare Political Action Commi	ttee					
Full Name (Last, First, Middle Initial)				ion ID: 6032	0.E680	
Pete Stark Re-election Committee		isbursement	YYY	Υ		
Mailing Address PO Box 8331			0 2	0 2	žoŏe	5
City Fremont	State Zip Code CA 94537-8331		Amount o	f Each Disbui	rsement this I	Period
Purpose of Disbursement	OA 34307-0301				1000.	00
Condidate Name		0.1				
Candidate Name		Category/ Type				
	ement For: 2006 Primary General					
President	Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial) 3. Jerry Weller For Congress				ion ID: 6032 isbursement	0.E685	
	de Do		0 2 M	/ D D /	2006	3 Y
Mailing Address 4451 Brookfield Corporate Dr				20	2000	
City Chantilly	State Zip Code VA 20151-1693		Amount o	f Each Disbui	rsement this I	Period
Purpose of Disbursement	20101 1000				500.	00
Candidate Name		Cotogon				
GERALD C JERRY WELLER		Category/ Type				
	ement For: 2006					
Senate President	Primary GeneralOther (specify) ▼					
State: IL District: 11						
Full Name (Last, First, Middle Initial) Bill Young Campaign Committee				ion ID: 6032 isbursement	0.E681	
Mailing Address PO Box 103			02	15	žoóe	6 Y
City	State Zip Code		Amount o	f Each Disbu	rsement this I	Period
Arlington Purpose of Disbursement	VA 22210-0103				1000.	00
Candidate Name		Category/ Type				
· — — — —	ement For: 2006					
Senate President	Primary GeneralOther (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional)		<u>►</u>			2500.	00
TOTAL This Period (last page this line number only)				7000.0	00
	,	-				